

**Quota International of Wooster
Student Scholarship Application Form**

Quota International of Wooster's primary focus is to serve the speech and hearing impaired. The club has a special interest in assisting those pursuing a career in **speech or hearing or a related field**; this is not mandatory, but it could be a benefit when being considered for this application. Applications are open to high school students entering college and current students seeking additional support.

Name _____ Date of Birth _____

Address _____

Home phone _____ Cell phone _____

High School Attending & Graduation Date _____

Father Step-father Guardian

Mother Step-mother Guardian

Name _____ Age _____ Name _____ Age _____

Address _____ Address _____

Occupation _____ Occupation _____

Employer _____ Occupation _____

Gross family income _____

Number of dependent children claimed by you parent(s) on Federal Income Tax Return.
_____. List by name and give age.

_____	_____	_____	_____	_____	_____
Name	Age	Name	Age	Name	Age

_____	_____	_____	_____	_____	_____
Name	Age	Name	Age	Name	Age

Number in college excluding applicant _____ other dependents _____

Anticipated field of study _____

What career do you hope to pursue? _____

Have you applied to a college or university? _____

Have you been accepted at a college or university? _____ If so, list name and address of college or university. _____

Approximate cost for school year including room, board, tuition, books: _____

Grants, scholarships, fellowships, assistantships, loans, & other aid already awarded: _____

On a separate sheet of paper, write a brief (300 words or less) biography of yourself, including interests, extracurriculars, work experience, and professional or occupational plans.

List awards or honors received while in high school _____

Do you have a hearing or speech impairment? If so, please explain _____

I hereby certify that the above information is correct and that I am not a child or grandchild of a Quota Club member.

Applicants Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

Please return this form to your guidance counselor who will complete the following information and return it to the Quota Club Scholarship Chairman: official high school transcript, photocopy of ACT/SAT scores, letters of recommendation from two teachers and a guidance counselor.

To be considered for scholarship funds, the completed application must be received by the scholarship chair by April 1. Incomplete applications will not be considered. Those awarded scholarships will be notified by May 30.

**Quota International of Wooster
Counselor's Documentation for Student Applicants**

Counselors,

The following information must accompany this application:

Students Name _____

GPA _____

Class Rank _____ **out of** _____

ACT Scores _____ **SAT Scores** _____

Please attach:

- 1. Copy of transcripts**
- 2. Copy of ACT/SAT scores**
- 3. Recommendation letters from 2 teachers and 1 guidance counselor**
- 4. Personal statement composed by applicant**

For an applicant to be considered, this form and attached components must be received by the Quota Club Scholarship Committee Chairman by April 1.

Signature of Counselor